Case 20-11873-JNP Doc 19 Filed 06/27/20 Entered 06/27/20 22:37:22 Desc Mair Document Page 1 of 7

Debtor 2. Chrisann Midde Heno Egnatuk (Spound, if filing) First Name Middle Name Linst Name Linstead States Bankmuntov Court for their District of Navy Joseph	Debtor 1	Samuel	T	Eanatuk, JK
(Spouse, if filing) First Name Mildly Name Listi Name	Dobtne 2	A	Middle Namo	FANATAK
United States Bankruptcy Court for the: District of New Jersey			Middle Name	Lust Name
STATES CHARGE COUNTY OF THE CONTROL OF THEM SEEDEN	United State	s Bankruptcy Court for the:	District of New Je	rsey

☑ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571.

y to help you fill out bankruptcy forms?
Attach Bankruptcy Petition Proparer's Notice, Declaration, and Signature (Official Form 119).
ary and schedules filed with this declaration and
Chrisan M. Egratuk

FI	I in this information to identify your o	030		The second second	OTE				
De	ebtor 1 Samuel T E	gnatuk							
1.503	obtor 2 Chrisann M	Egnatuk			- 0				
Ur	ited States Bankruptcy Court for the	: DISTRICT OF NEW .	JERSEY						
2752	se number 20-11873					Check if this is An amende	ed filing	wing postpetition c	hapter
0	fficial Form 106I							e following date:	7500
-						MM / DD/ Y	YYY		
	chedule I: Your Inc as complete and accurate as pos				2000000			V 5-30 - 11 - 10 - 10 - 10 - 10 - 10 - 10 -	12/15
atta	ouse. If you are separated and you ach a separate sheet to this form. Describe Employment	on the top of any additi	onal pages, write yo	de intor	mati e and	on about your spo d case number (if	buse. If known	more space is ne). Answer every q	eded, uestion
1.	Fill in your employment information.		Debtor 1			Debtor 2	or noi	n-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			Emple	oyed		
	information about additional	Zinpioyinoni status	□ Not employed			☐ Not e	mploye	d	
	employers.	Occupation	Public Works			Tech			
	Include part-time, seasonal, or self-employed work.	Employer's name	Borough of Bar	ringtor	13	State o	f NJ M	vc	
	Occupation may include student or homemaker, if it applies.	Employer's address	10 Reamer Driv Barrington, NJ	7100 M L C C C		2600 M Camde		aim Ave 08092	
		How long employed to	here? 16 Y			3	Υ		
Pa	Give Details About Mor	thly Income							
Esti	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write \$0 in the	space.	Include your non-f	ling
spo						overs for that noten		e lines below. If vo	uneed
f yo	u or your non-filing spouse have mo e space, attach a separate sheet to	ere than one employer, co this form.	embine the information	n for all i	emple	Dyura for trial perso	n an th	S0162845-515.70 71.16	
f yo	u or your non-filing spouse have mo e space, attach a separate sheet to	ere than one employer, co this form.	embine the information	n for all i	empl	For Debtor 1	For	Debtor 2 or filing spouse	7300 <u>1.</u> 876
f yo	u or your non-filing spouse have mo e space, attach a separate sheet to List monthly gross wages, salar deductions). If not paid monthly, o	this form. ry, and commissions (be	efore all payroll	n for all i	emple \$		For	Debtor 2 or	
f yo	e space, attach a separate sheet to List monthly gross wages, salar	this form. ry, and commissions (be calculate what the monthly	efore all payroll			For Debtor 1	For I	Debtor 2 or filing spouse	

Official Form 106I Schedule I: Your Income page 1

Case 20-11873-JNP Doc 19 Filed 06/27/20 Entered 06/27/20 22:37:22 Desc Main Document Page 3 of 7

Debtor 1 Debtor 2	Samuel T Egnatuk Chrisann M Egnatuk		Case	number (if known)	20-11873		
			For	Debtor 1	For Debto		,
Co	py line 4 here	4,	\$	5,636.58		4,237.1	Colonia materialista del Colonia del Colon
5. Lis	st all payroll deductions:						
5a.	Tax, Medicare, and Social Security deductions	5a	S	817.94	\$	826.1	8
5b.	[]	5b.	5	424.02	\$	268.7	
5c.	Book - [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18] 15 [18]	5c.	s	0.00	\$	0.0	video.
5d.		5d.	\$	523.04	s	248.0	Silver Control
5e.	01 M 10050	5e.	1121	549.43	s	78.2	
5f.	Domestic support obligations	5f.	\$	0.00	S	0.0	Market Control of the
5g.		5g.	\$	46.95	\$	41.3	manufacture and the second
5h.	Other deductions. Specify:	5h		144000000000000000000000000000000000000	+ \$	0.0	citizani.
Ad	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,361.38	\$	1,462.5	1
. Ca	culate total monthly take-home pay. Subtract line 6 from line 4,	7.	S	3,275.20	\$:	2,774.6	3
8. Lis 8a.	It all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	0
8b.		8b.		0.00	\$	0.0	
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	nt 8c,	s	0.00	\$	0.00	
8d.	Unemployment compensation	Bd.	S	0.00	\$	0.00	and the second
8e.	Social Security	8e.	\$	0.00	\$	0.00	
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 8f.	\$	0.00	s	0.00	- 2
8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	0
8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	0
Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	S_	0.00	\$	0.0	00
	culate monthly income. Add line 7 + line 9.	10. \$	3	3,275.20 + \$	2,774.63	= \$	6,049.83
Auc	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse,						
Incl oth Do	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, yo er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no ecify:	ur depen			ed in <i>Schedul</i>	o J. +\$	0.00
Writ	d the amount in the last column of line 10 to the amount in line 11. The re- te that amount on the Summary of Schedules and Statistical Summary of Cen- lies	esult is th tain Liabi	ne com lities a	bined monthly in nd Related Data	icome. , if it	\$	6,049.83
3. Do	you expect an increase or decrease within the year after you file this for	m?				Comb	ined Ily income
	No. Yes, Explain:						

Case 20-11873-JNP Doc 19 Filed 06/27/20 Entered 06/27/20 22:37:22 Desc Main Document Page 4 of 7

Fill in	n this informa	ation to identify y	our case:							
Debto	or 1	Samuel T E	gnatuk			Chi	eck if this is:			
Debtor (Spour	or 2 use, if filing)	Chrisann M Egnatuk					 □ An amended filing □ A supplement showing postpetition chapte 13 expenses as of the following date: 			
. +50*00000	V1011	ruptcy Court for the	: DISTR	CT OF NEW JERSEY			MM / DD / YYYY			
	number 2	0-11873	=======================================	(4						
Offi	ficial Fo	orm 106J								
Sch	hedule	J: Your	Exper	ises				12/		
Be as	s complete mation. If n	and accurate as	s possible eded, atta	. If two married people a ich another sheet to this	re filing together, both form. On the top of a	n are eq ny addit	ually responsible fo ional pages, write y	or supplying correct		
Part 1	Desc	ribe Your House	ehold	*20\						
	□ No. Go to	ine 2.								
1	Yes, Doe	es Debtor 2 live	in a separ	ate household?						
	□ Y		st file Offic	al Form 106J-2, Expenses	s for Separate Househo	ld of Del	otar 2.			
2. C	Do you hav	e dependents?	□ No							
0	Do not list D Debtor 2.	constant the constant start.	Yes.	Fill cut this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?		
Ė	Do not state	the			See and	-		□No		
d	dependents	names.			Daughter		23 Y	■ Yes		
					Son		26 Y	□ No ■ Yes		
					-		201	■ res		
								☐ Yes		
								□ No		
		8 5 9			9			☐ Yes		
0	expenses o	enses include f people other t d your depende	han 🖂	No Yes						
Estim	ate your ex	ate Your Ongoi openses as of your or date after the l	our bankri	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this form	n as a si check t	upplement in a Cha	pter 13 case to report		
applic	cable date.			•			2			
the va	alue of such	n assistance an		government assistance i luded it on <i>Schedule I:</i>)						
(Offici	ial Form 10	61.)				FOR SERVICE	Your expe	enses		
		r home owners id any rent for the		ses for your residence. I lot.	nclude first mortgage	4.	\$	1,836.00		
lf	f not includ	ed in line 4:								
4	ta. Real e	state taxes				4a. S	5	0.00		
		rty, homeowner's	, or renter	s insurance		4b.	100	0.00		
	tc. Home	maintenance, re	pair, and u	pkeep expenses		4c, 3		100.00		
		owner's associat				4d.		0.00		
5. A	Additional n	nortgage payme	ents for yo	ur residence, such as ho	me equity loans	5. 3	3	0.00		

Case 20-11873-JNP Doc 19 Filed 06/27/20 Entered 06/27/20 22:37:22 Desc Main Document Page 5 of 7

ebtor 2	Chrisann M Egnatuk	Case nun	nber (if known)	20-11873
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	S	442.00
6b.	Water, sewer, garbage collection	6b.	S	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		375.00
6d.	Other, Specify:	6d.	\$	0.00
Food	d and housekeeping supplies	7.	\$	500.00
	dcare and children's education costs	8.	\$	0.00
Clot	hing, laundry, and dry cleaning	9.	576	150.00
	onal care products and services	10.	(21)	100.00
Med	ical and dental expenses	11.		250.00
	sportation. Include gas, maintenance, bus or train fare.		70	230.00
Do n	ot include car payments.	12.	S	375.00
. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	250.00
Char	itable contributions and religious donations	14.	\$	60.00
Insu				3000000
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.		0.00
	Health insurance	15b.	8)	0.00
	Vehicle insurance	15c.	72	290.00
	Other insurance, Specify:	15d.	\$	0.00
	 Do not include taxes deducted from your pay or included in lines 4 or 2 			CALCOUR.
Spec		16.	\$	0.00
	Illment or lease payments: Car payments for Vehicle 1	4.75	ø.	
	[2] [10] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	17a.	7.5	394.00
	Car payments for Vehicle 2 Other, Specify:	17b.		0.00
		17c.	172	0.00
	Other. Specify:	17d.	2	0.00
dod	payments of alimony, maintenance, and support that you did not re acted from your pay on line 5, Schedule I, Your Income (Official Form	port as 1060 18.	S	0.00
Othe	r payments you make to support others who do not live with you.	1001).	S	0.00
Spec		19.	*	0.00
	r real property expenses not included in lines 4 or 5 of this form or o		our Income	
20a.	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	1767	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.		0.00
	r: Specify: pet care	21.	77.	
- WEST 100 100 100 100 100 100 100 100 100 10	AND THE CONTRACT OF THE PROPERTY OF THE PROPER	41.		100.00
Calcu	late your monthly expenses			
	Add lines 4 through 21.		\$	5,322.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
22c. /	Add fine 22a and 22b. The result is your monthly expenses.		\$	5,322.00
(A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			**	0,022.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		6,049.83
23b.	Copy your monthly expenses from line 22c above.	23b.	-8	5,322.00
00-	B/ADDICA DEL COMO CONTROL DE CONT			100-001000000
23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	727.83
	The result is your monthly her income.	200.		121.03
Do yo	ou expect an increase or decrease in your expenses within the year	after you file this	form?	
For ex	ample, do you expect to finish paying for your car loan within the year or do you exp	ect your mortgage s	payment to increa	ase or decrease because o
modific	cation to the terms of your mortgage?			
■ No	6			
140				
☐ Ye	s. Explain here: Debtor drives a car titled in her son's n	ame and she n	nakes the pa	lyments and pays the

Case 20-11873-JNP Doc 19 Filed 06/27/20 Entered 06/27/20 22:37:22 Desc Main Document Page 6 of 7

Debtor 1	Samuel T Egnatu	k		
	First Name	Middle Name	Last Name	
Debtor 2	Chrisann M Egna	tuk		
(Spause If, filing)	First Name	Middle Name	Last Name	
United States (Bankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number	20-11873			

 Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/1:

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pal	t 1: Summarize Your Assets		
		U-0000 TO 200	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	170,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	42,375.0
	1c. Copy line 63, Total of all property on Schedule A/B	S	212,375.0
Par	12: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	269,832.1
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	589,00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	11,392.09
	Your total liabilities	\$	281,813.20
Par	3 Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,049.83
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,322.00
ar	4. Answer These Questions for Administrative and Statistical Records		
š.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form, Check this box and submit this form to the court with you	ur other so	chedules.
	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	I, family, or
	TENNE SWIN IN SESSEN WIND IN IN IN IN TO SWIN WARNESS SES LAWS		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Case 20-11873-JNP Doc 19 Filed 06/27/20 Entered 06/27/20 22:37:22 Desc Main Document Page 7 of 7

Debtor 1	Samuel T Egnatuk
Debtor 2	Chrisann M Egnatuk

Case number (if known) 20-11873

the court with your other schedules.

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,155.45

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	alm
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	589.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total . Add lines 9a through 9f.	\$	589.00